

# PRAESIDIUM



## TOP 10 THINGS

Every Medical Chaperone  
Should Know

---

## Indemnity Statement

**Praesidium provides Sample Policies and Procedures to assist in the prevention of organizational abuse. However, it must be noted that no system can guarantee prevention of abuse.** This information is not legal advice, either expressed or implied. Consultation with qualified legal counsel is recommended.

When all recommendations are implemented and maintained, a risk for abuse continues to exist, as the problem of abuse is pervasive and no system to date can assure complete safety.

Accordingly, **PRAESIDIUM MAKES NO WARRANTIES, EXPRESS OR IMPLIED, INCLUDING WARRANTIES OF FITNESS FOR A PARTICULAR PURPOSE AND MERCHANTABILITY, REGARDING THE SUCCESS OR FAILURE OF THE PRAESIDIUM SAMPLE POLICIES AND PROCEDURES IN PREVENTING OR REDUCING THE INCIDENCE OF ABUSE**

## A PRACTICAL GUIDE FOR SAFE, CONSISTENT, AND ACCOUNTABLE SENSITIVE EXAMS

Medical chaperones play a critical role in protecting patients, supporting providers, and reinforcing professional boundaries. This role is not passive. It requires attention, clarity, and a willingness to act when something is unclear.

Use this guide to reinforce what effective chaperoning looks like in practice.

### 1. YOU ARE NOT JUST PRESENT, YOU HAVE A PURPOSE

Your role is to serve as both a patient advocate and professional witness.

- Being in the room is not enough.
- You are there to actively support safe, respectful care.

### 2. THE PATIENT SHOULD ALWAYS KNOW WHY YOU ARE THERE

Introduce yourself and explain your role clearly. Transparency builds trust and reduces confusion. Patients should understand:

- Why a chaperone is present
- What the exam involves
- That they can ask questions at any time

### 3. CONSENT MUST BE ONGOING, NOT ONE-TIME

The need for patient consent and understanding does not end when the exam begins

- Pay attention to whether the exam matches what was explained
- If something changes, clarification should happen before the exam continues

### 4. PAY ATTENTION TO MORE THAN WORDS

Discomfort is not always verbalized. Watch for nonverbal cues such as:

- Hesitation
- Tension
- Withdrawal
- Changes in tone or responsiveness



## 5. BOUNDARIES CAN SHIFT IN SUBTLE WAYS

Early recognition is key to prevention. Not all concerns are obvious. Be aware of:

- Language that becomes overly casual or personal
- Unexpected changes in exam scope
- Positioning or touch that seems inconsistent with the explanation

## 6. YOU ARE ALLOWED TO ASK QUESTIONS

Asking questions is part of your role, not a disruption. If something is unclear, you can speak up. Examples include:

- “Can we pause so the next step can be explained?”
- “Would it help to clarify what will happen next?”

## 7. YOU CAN, AND SHOULD, PAUSE THE INTERACTION IF NEEDED

If something feels inconsistent or unclear, it is appropriate to pause. Pausing supports:

- Patient understanding
- Clear communication
- Safe continuation of care

## 8. DOCUMENTATION MATTERS

Documentation should be objective and factual. Accurate documentation helps protect everyone involved. Be prepared to document:

- Your presence
- Patient preferences or refusal
- Any pauses, concerns, or unusual interactions

## 9. REPORTING IS A PROFESSIONAL RESPONSIBILITY

If a concern arises, follow your organization's reporting process. Remember, reporting is not about assigning blame. It is about ensuring safety, accountability, and appropriate follow-up.

## 10. YOU ARE PART OF A LARGER SAFETY SYSTEM

Your role is one part of a broader effort to prevent harm and strengthen patient trust. Effective chaperoning is supported by:

- Clear policies
- Practical training
- Consistent supervision
- Accessible reporting systems

